

Please print or type. (Form designed for use on elite (12-pitch) typewriter.)

Form Approved. OMB No. 2050-0039

<b>UNIFORM HAZARDOUS WASTE MANIFEST</b>		1. Generator ID Number 46846	2. Page 1 of	3. Emergency Response Phone	4. Manifest Tracking Number <b>008037590 FLE</b>
5. Generator's Name and Mailing Address Clean Harbors Kansas LLC 2548 North New York Street Wichita, KS 67219 Generator's Phone: (316) 269-7400			Generator's Site Address (if different than mailing address) SAME		
6. Transporter 1 Company Name US Bulk Transportation Inc			U.S. EPA ID Number PA098734515		
7. Transporter 2 Company Name			U.S. EPA ID Number		
8. Designated Facility Name and Site Address Clean Harbors Lone Mountain LLC 40355 S County Road 236 Wavoka, OK 73860 Facility's Phone: (580) 697-3500			U.S. EPA ID Number OKD065438376		
GENERATOR	9a. HM	9b. U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any))	10. Containers		11. Total Quantity
			No.	Type	12. Unit Wt./Vol.
	1.	HAZARDOUS WASTE, SOLID, R.O.S., (FOO1, F003), 2, PG III	1	DT	EST 16
	2.				Y
	3.				
14. Special Handling Instructions and Additional Information LCH031502X05 2809171			13. Waste Codes FOO1 F002 F003 FOO4 F005		
15. GENERATOR'S/OFFEROR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by the proper shipping name, and are classified, packaged, marked and labeled/placarded, and are in all respects in proper condition for transport according to applicable international and national governmental regulations. If export shipment and I am the Primary Exporter, I certify that the contents of this consignment conform to the terms of the attached EPA Acknowledgment of Consent. I certify that the waste minimization statement identified in 40 CFR 262.27(a) (if I am a large quantity generator) or (b) (if I am a small quantity generator) is true.					
Generator's/Offor's Printed/Typed Name Jim Tyson		Signature Jim Tyson		Month Day Year 2 4 15	
TRANSPORTER	16. International Shipments <input type="checkbox"/> Import to U.S. <input type="checkbox"/> Export from U.S.		Port of entry/exit: Date leaving U.S.:		
	17. Transporter Acknowledgment of Receipt of Materials				
	Transporter 1 Printed/Typed Name Rick Neale	Signature Rick Neale	Month Day Year 2 4 15		
	Transporter 2 Printed/Typed Name	Signature	Month Day Year		
DESIGNATED FACILITY	18. Discrepancy				
	18a. Discrepancy Indication Space <input type="checkbox"/> Quantity <input type="checkbox"/> Type <input type="checkbox"/> Residue <input type="checkbox"/> Partial Rejection <input type="checkbox"/> Full Rejection				
	18b. Alternate Facility (or Generator) U.S. EPA ID Number				
	Facility's Phone:				
	18c. Signature of Alternate Facility (or Generator) Month Day Year				
19. Hazardous Waste Report Management Method Codes (i.e., codes for hazardous waste treatment, disposal, and recycling systems)					
1. 8152		2.		3.	
20. Designated Facility Owner or Operator: Certification of receipt of hazardous materials covered by the manifest except as noted in Item 18a					
Printed/Typed Name		Signature		Month Day Year	

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<b>UNIFORM HAZARDOUS WASTE MANIFEST</b>		1. Generator ID Number KSD0007246846	2. Page 1 of 1	3. Emergency Response Phone (800) 455-3718	4. Manifest Tracking Number <b>008037590 FLE</b>		
5. Generator's Name and Mailing Address <b>Clean Harbors Kansas LLC 2549 North New York Street Wichita, KS 67219 Generator's Phone: (316) 269-7400</b>				Generator's Site Address (if different than mailing address) <b>SAME</b>			
6. Transporter 1 Company Name <b>US Bulk Transportation Inc</b>				U.S. EPA ID Number <b>PA098734515</b>			
7. Transporter 2 Company Name				U.S. EPA ID Number			
8. Designated Facility Name and Site Address <b>Clean Harbors Lone Mountain LLC 40355 S County Road 236 Wynoka, OK 73860 Facility's Phone: (580) 687-3500</b>				U.S. EPA ID Number <b>OKD065438376</b>			

9a. HM	9b. U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any))	10. Containers		11. Total Quantity	12. Unit Wt./Vol.	13. Waste Codes		
		No.	Type			F001	F002	F003
x	1. <b>HA3077, HAZARDOUS WASTE, SOLID, N.O.S., (F001, F003), 9, PG III</b>	1	DT	EST 16	Y	F001	F002	F003
	2.					F004	F005	
	3.							
	4.							

14. Special Handling Instructions and Additional Information  
**1. CH331502X05 ERG#171**  

TR# 324      TL# 302

15. **GENERATOR'S/OFFEROR'S CERTIFICATION:** I hereby declare that the contents of this consignment are fully and accurately described above by the proper shipping name, and are classified, packaged, marked and labeled/placarded, and are in all respects in proper condition for transport according to applicable international and national governmental regulations. If export shipment and I am the Primary Exporter, I certify that the contents of this consignment conform to the terms of the attached EPA Acknowledgment of Consent. I certify that the waste minimization statement identified in 40 CFR 262.27(a) (if I am a large quantity generator) or (b) (if I am a small quantity generator) is true.

Generator's/Officer's Printed/Typed Name <b>Jim Tyson</b>	Signature <i>Jim Tyson</i>	Month <b>2</b>	Day <b>9</b>	Year <b>15</b>
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16. International Shipments ☐ Import to U.S. ☐ Export from U.S. Port of entry/exit: \_\_\_\_\_ Date leaving U.S.: \_\_\_\_\_  
 Transporter signature (for exports only): \_\_\_\_\_

17. Transporter Acknowledgment of Receipt of Materials				
Transporter 1 Printed/Typed Name <b>Rick Farmer</b>	Signature <i>Rick Farmer</i>	Month <b>2</b>	Day <b>4</b>	Year <b>15</b>
Transporter 2 Printed/Typed Name	Signature	Month	Day	Year

18. Discrepancy  
 18a. Discrepancy Indication Space ☐ Quantity ☐ Type ☐ Residue ☐ Partial Rejection ☐ Full Rejection  
 Manifest Reference Number: \_\_\_\_\_

18b. Alternate Facility (or Generator)				U.S. EPA ID Number		
Facility's Phone: _____						
18c. Signature of Alternate Facility (or Generator)				Month	Day	Year

19. Hazardous Waste Report Management Method Codes (i.e., codes for hazardous waste treatment, disposal, and recycling systems)

1. <b>H132</b>	2.	3.	4.
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20. Designated Facility Owner or Operator: Certification of receipt of hazardous materials covered by the manifest except as noted in Item 18a

Printed/Typed Name <b>Windy Bradford</b>	Signature <i>Windy Bradford</i>	Month <b>12</b>	Day <b>4</b>	Year <b>15</b>
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